1/09/25 8:26PM

Fill in this information to identify your case:							
Debtor 1	Patricia Rosalie Page						
Debtor 2 (Spouse, if filing)							
United States B	sankruptcy Court for the: District of Utah						
Case number (if known)							

Check as directed in lines 17 and 21:									
	According to the calculations required by this Statement:								
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
3. The commitment period is 3 years.									
	4. The commitment period is 5 years.								
_									

☐ Check if this is an amended filing

## Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income** and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	11: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
1 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6- te 6 months, add the income for all 6 months and divide the tot pouses own the same rental property, put the income from that	month peri al by 6. Fill	iod would in the re	l be March 1 throu sult. Do not includ	igh August 31 le any income	. If the ame	ount of your monthly income ore than once. For example	e varied during e, if both
					Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before all	\$	0.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not includ Column B is filled in.	e paymer	nts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly por you or your dependents, including child support from an unmarried partner, members of your househout and roommates. Do not include payments from a sport you listed on line 3.	<b>rt.</b> Include ld, your d	e regulai lepende	r contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	ırm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Patricia Rosalie Page

Debtor 1

Case number (if known)

						olumn A ebtor 1		Column B Debtor 2 o non-filing		
7.	Interest, c	lividends, and royalties			\$		0.00	\$		
8.	Unemploy	ment compensation			\$		0.00	\$		
		er the amount if you contend that the amo Security Act. Instead, list it here:	ount received was a bene	efit under						
	For you	r spouse	\$0	.00						
	For you	r spouse	\$							
9.	benefit und not include United Sta disability, o pay paid u does not e	or retirement income. Do not include any der the Social Security Act. Also, except a e any compensation, pension, pay, annuity ates Government in connection with a disa or death of a member of the uniformed sender chapter 61 of title 10, then include the exceed the amount of retired pay to which ander any provision of title 10 other than chapter 61.	s stated in the next senter, or allowance paid by the bility, combat-related injuvices. If you received an at pay only to the extent you would otherwise be	ence, do ne ury or ny retired that it	\$_		0.00	\$		
10.	Do not inc received a domestic t United Sta disability,	om all other sources not listed above. Iude any benefits received under the Socials a victim of a war crime, a crime against errorism; or compensation, pension, pay, ates Government in connection with a disator death of a member of the uniformed sent a separate page and put the total below.	al Security Act; payment humanity, or internationa annuity, or allowance pa bility, combat-related inju vices. If necessary, list o	s al or id by the ury or	· \$		0.00	\$		
	_				\$		0.00	- '		
	т	otal amounts from separate pages, if any.			\$ \$		0.00	- '		
		otal amounts from soparate pages, it arry.		_	Ψ-		0.00	-		
11. Part	each colur	your total average monthly income. Ad nn. Then add the total for Column A to the termine How to Measure Your Deduction	e total for Column B.	\$		0.00	\$			0.00 average
12.	Copy you	r total average monthly income from lir the marital adjustment. Check one:							\$	0.00
	■ You a	are not married. Fill in 0 below.								
	_	are married and your spouse is filing with y	vou. Fill in 0 below.							
	_	are married and your spouse is not filing w								
		the amount of the income listed in line 11 ndents, such as payment of the spouse's								
		w, specify the basis for excluding this incontents on a separate page.	me and the amount of in	come de	vote	d to each p	urpos	se. If necessary	, list additio	nal
	If this	adjustment does not apply, enter 0 below	<i>1</i> .							
				- \$						
				- ♣—						
				- +\$						
		Total		\$		0.00	c	Copy here=>		0.00
14.	Your cur	rent monthly income. Subtract line 13 fi	rom line 12.						\$	0.00
15.	Calculat	e your current monthly income for the y	year. Follow these steps	3:						
	15a. Co	py line 14 here=>							\$	0.00

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Debto	or 1	Patr	icia Rosaile Page	Case numbe	r (If Known)	
		М	ultiply line 15a by 12 (the number of months in	a year).		<b>x</b> 12
	15	b. Th	e result is your current monthly income for the	e year for this part of the form		\$
16.	Cal	culate	the median family income that applies to y	/ou. Follow these steps:		
	16a	. Fill ir	the state in which you live.	UT		
	16b	. Fill ir	the number of people in your household.	1		
	16c.	To fir	the median family income for your state and a ad a list of applicable median income amounts actions for this form. This list may also be avai	s, go online using the link specified in the s	separate	\$80,215.00
17.	Hov	v do t	ne lines compare?			
	17a	. •	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		•	
	17b	. 🗆	Line 15b is more than line 16c. On the top (1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 a	ulation of Your Disposable Income (Office		
Part	3:	Ca	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	y you	r total average monthly income from line 1	1.	\$_	0.00
19.	conf	tend th	e marital adjustment if it applies. If you are at calculating the commitment period under 1 ncome, copy the amount from line 13.			
	19a	. If the	marital adjustment does not apply, fill in 0 on	line 19a.	<b>-</b> \$_	0.00
	19b	. Subt	ract line 19a from line 18.			\$
20.	Cal	culate	your current monthly income for the year.	Follow these steps:	_	
	20a	. Сору	line 19b			\$
		Multi	oly by 12 (the number of months in a year).			<b>x</b> 12
	20b	. The	esult is your current monthly income for the y	ear for this part of the form		\$
	20c.	. Сору	the median family income for your state and	size of household from line 16c		\$80,215.00
	21.	How	do the lines compare?			
			Line 20b is less than line 20c. Unless otherwi period is 3 years. Go to Part 4.	se ordered by the court, on the top of page	e 1 of this form, check bo	x 3, The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise ordered by the court, on the	e top of page 1 of this for	m, check box 4, The
Part	4:	Sig	n Below			
	By s	signing	here, under penalty of perjury I declare that t	he information on this statement and in an	ıy attachments is true and	d correct.
X			cia Rosalie Page			
			Rosalie Page e of Debtor 1			
	•	∍ Jar	uary 9, 2025			
	If vo		/ DD / YYYY  cked 17a, do NOT fill out or file Form 122C-2.			
	-		cked 17a, do NOT fill out of file Form 122C-2.	this form. On line 39 of that form, convivou	ır current monthly income	from line 14 above
	y C	OIIG	, oat i oiiii izzo z ana mo it with t		Jan Jik monany moonie	

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Debtor 1 Patricia Rosalie Page Case number (if known)

## **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 07/01/2024 to 12/31/2024.